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USDC - BALTIMORE
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Rcv'd by: AW

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MARYLAND

Charles Fenner on behalf
Baltimore Police Emergency Dispatch
& other similarly situated plaintiffs

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-against-

Mayor & City Council Baltimore
Baltimore Police Department

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Complaint for a Civil Case

Case No. JRR 24 CV 2714
(to be filled in by the Clerk's Office)

Jury Trial: ☒ Yes ☐ No
(check one)

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Charles Fenner
Street Address	3308 Fairview Ave B
City and County	Baltimore
State and Zip Code	Maryland 21216
Telephone Number	
E-mail Address	mr.lamont.f@gmail.com

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	Baltimore Police Department
Job or Title (if known)	
Street Address	100 N. Holliday St
City and County	Baltimore
State and Zip Code	Maryland, 21201.
Telephone Number	
E-mail Address (if known)	

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Minuet Bradley</u>
Street Address	<u>3411 Barkley Woods Rd</u>
City and County	<u>Windsor Mill MD</u>
State and Zip Code	<u>Maryland 21244</u>
Telephone Number	<u>443-802-5151</u>
E-mail Address	<u>minuetb008@yahoo.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>HEIDI BOYD</u>
Street Address	<u>118 N. HOWARD ST. Apt 506</u>
City and County	<u>BALTIMORE MARYLAND</u>
State and Zip Code	<u>MARYLAND 21201</u>
Telephone Number	<u>443-766-8162</u>
E-mail Address	<u>SUNSHINEZEBRA.HH@GMAIL.COM</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u>EMERGENCY DISPATCHER</u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Jenise Brown
Street Address	5104 EUGENE AVE
City and County	Baltimore
State and Zip Code	MD, 21206
Telephone Number	443 825 5725
E-mail Address	jenise-brown90@yahoo.com

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	Baltimore Police Department
Job or Title (if known)	
Street Address	601 E. Fayette St
City and County	Baltimore City
State and Zip Code	MD, 21201
Telephone Number	
E-mail Address (if known)	

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Jerome Currell</u>
Street Address	<u>6957 Blanche Rd</u>
City and County	<u></u>
State and Zip Code	<u>Baltimore MD 21215</u>
Telephone Number	<u>413-226-1627</u>
E-mail Address	<u>JCurrell1304@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u>Emergency Dispatcher</u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u>413-226-1627</u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Darryl Dinkins</u>
Street Address	<u>3204 Old Post Dr Apt 1</u>
City and County	<u>Pikesville</u>
State and Zip Code	<u>MD</u>
Telephone Number	<u>443-435-6184</u>
E-mail Address	<u>ddinkindaddy@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Dominick Dix</u>
Street Address	<u></u>
City and County	<u></u>
State and Zip Code	<u></u>
Telephone Number	<u>410 - 979 - 7968</u>
E-mail Address	<u>DDix0707@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Derrick Evans</u>
Street Address	<u>9 Cherrywood ct</u>
City and County	<u>Essex, MD 21221</u>
State and Zip Code	<u>MD, Maryland 21221</u>
Telephone Number	<u>443-928-7615</u>
E-mail Address	<u>Dekg99@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

CHRISTOPHER GRAHAM

Street Address

City and County

State and Zip Code

Telephone Number

410-225-6495

E-mail Address

Chrisndarce11@yahoo.com**B. The Defendant(s)**

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name

Baltimore Police DepartmentJob or Title
(if known)

Street Address

601 E. Fayette St

City and County

Baltimore City

State and Zip Code

MD, 21201

Telephone Number

E-mail Address
(if known)

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Keyana Griffin</u>
Street Address	<u>3711 Yosemite Avenue</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>Maryland 21215</u>
Telephone Number	<u>443-248-2910</u>
E-mail Address	<u>Kiakey@men.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Tracy Hall</u>
Street Address	<u>1506 Gleneagle Rd</u>
City and County	<u>Baltimore</u>
State and Zip Code	<u>Maryland</u>
Telephone Number	<u>443-600-1980</u>
E-mail Address	<u>SunnyKGAB90@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Quantina Jones</u>
Street Address	<u>1007 Argyle Ave</u>
City and County	<u>Baltimore MD</u>
State and Zip Code	<u>MD 21201</u>
Telephone Number	<u>443 642 1323</u>
E-mail Address	<u>Quantina.jones@baltimorecity.gov</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Teresa Lora</u>
Street Address	<u>[REDACTED]</u>
City and County	<u>[REDACTED]</u>
State and Zip Code	<u>[REDACTED]</u>
Telephone Number	<u>[REDACTED]</u>
E-mail Address	<u>keyonna6510@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Robert Lewis</u>
Street Address	_____
City and County	_____
State and Zip Code	<u>Maryland</u>
Telephone Number	<u>413-572-1293</u>
E-mail Address	<u>scold@yahoo.com scold333@yahoo.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	_____
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	_____
E-mail Address (if known)	_____

L.

A

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Mobutu A. Longshore

Street Address

5307 Remmell Ave

City and CountyBalt**State and Zip Code**

MO 21206

Telephone Number

410 635-9048

E-mail Address

~~XX~~

B.

MoButu, Longshore @ baltimorepolice.org

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name

Baltimore Police Department

**Job or Title
(if known)****Street Address**

601 E. Fayette St

City and County

Baltimore City

State and Zip Code

MD, 21201

Telephone Number

**E-mail Address ,
(if known)**

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Tijuanita McCoy</u>
Street Address	<u>1802 N. Montford Ave</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21215 21213</u>
Telephone Number	<u>443-682-4701</u>
E-mail Address	<u>TijuanitaMcCoy@yahoo.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Tyrese Moore</u>
Street Address	<u>219 Mc Kewin Ave</u>
City and County	<u>Baltimore md 21218</u>
State and Zip Code	
Telephone Number	<u>667 261 3601</u>
E-mail Address	<u>reese3569@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Toree Oliver</u>
Street Address	<u>35 Esperanza Ct</u>
City and County	<u>Pikesville, MD 21208</u>
State and Zip Code	<u>MD, 21208</u>
Telephone Number	<u>443-760-2192</u>
E-mail Address	<u>lovely.lady7891@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>KELLYE Rawlings</u>
Street Address	<u>2122 NORTHLAND RD</u>
City and County	<u>Gwynn Oak, MD</u>
State and Zip Code	<u>MARYLAND 21207</u>
Telephone Number	<u>410 913 1835</u>
E-mail Address	<u>bnitabug@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address

Robin Reed202 Cork Lane Apt 103Reisterstown Md BaltimoreMD 21136410 868 0045Robinreed37@yahoo.com**B. The Defendant(s)**

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name

Baltimore Police DepartmentJob or Title
(if known)

Street Address

601 E. Fayette St

City and County

Baltimore City

State and Zip Code

MD, 21201

Telephone Number

E-mail Address
(if known)

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Charae Rodgers
Street Address	3900 Fords Lane
City and County	Baltimore City
State and Zip Code	MD, 21215
Telephone Number	443-226-0733
E-mail Address	Charae09@gmail.com

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	Baltimore Police Department
Job or Title (if known)	
Street Address	601 E. Fayette St
City and County	Baltimore City
State and Zip Code	MD, 21201
Telephone Number	
E-mail Address (if known)	

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Sheena Scott</u>
Street Address	<u>3002 Orlando Ave</u>
City and County	<u>Baltimore MD 21234</u>
State and Zip Code	<u>Maryland 21234</u>
Telephone Number	<u>443-991-1938</u>
E-mail Address	<u>sheeneluv2@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Markita Smith</u>
Street Address	<u>138 W Hamburg St.</u>
City and County	<u>Baltimore,</u>
State and Zip Code	<u>Maryland 21230</u>
Telephone Number	<u>410-891-6864</u>
E-mail Address	<u>markitasmi@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>DIKESHA D. WOMACK</u>
Street Address	<u>301 Poplar Ridge Ct. Apt. 31</u>
City and County	<u>Baltimore</u>
State and Zip Code	<u>MD, 21117</u>
Telephone Number	<u>410-240-4370</u>
E-mail Address	<u>bullshiz78@yahoo.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Baltimore Police Department</u>
Job or Title (if known)	<u></u>
Street Address	<u>601 E. Fayette St</u>
City and County	<u>Baltimore City</u>
State and Zip Code	<u>MD, 21201</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

Defendant No. 2

Name

Mayor & City Council for Baltimore

**Job or Title
(if known)**

Street Address

100 N. Holliday St

City and County

Baltimore

State and Zip Code

Marylanad, 21201.

Telephone Number

**E-mail Address
(if known)**

Defendant No. 3

Name

**Job or Title
(if known)**

Street Address

City and County

State and Zip Code

Telephone Number

**E-mail Address
(if known)**

Defendant No. 4

Name

**Job or Title
(if known)**

Street Address

City and County

State and Zip Code

Telephone Number

**E-mail Address
(if known)**

(If there are more than four defendants, attach an additional page providing the same information for each additional defendant.)

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MARYLAND

INTRODUCTION

Plaintiffs and those similarly situated bring this action for violations of the Fair Labor Standards Act, 29 U.S.C. § 201, et seq. (FLSA), and Code of Federal Regulations, 29 C.F.R 778.41. Plaintiffs assert that Defendants failed to fully compensate them for all hours of overtime worked, in violation of the aforementioned laws.

The civilian men and women who work for the Baltimore Police Department as Emergency Dispatchers, and other similarly situated employees, work tirelessly to assist in keeping Baltimore safe. Emergency Dispatchers specifically assist in keeping the sworn men and women of the Baltimore Police Department safe while responding to calls for service. They act as a bridge that connects millions of calls for service from citizens to Fire/EMS, and other federal, state, or local agencies. At any given moment, Emergency Dispatchers are faced with dispatching calls for service, making split-second decisions, and working with limited manpower, all for the love of helping others and serving the community.

Plaintiffs voluntarily work many hours of overtime and simply ask to be compensated for all overtime hours worked at the correct rate of time and one-half, in accordance with all applicable laws.

Plaintiffs have attempted both formally and informally to notify not only CUB 800 Local AFT AFL-CIO, regarding overtime error calculations and labor law violations (Exhibit F of correspondence to various parties), but also the

defendants, through various means such as email and phone calls to various agency and department heads, including the comptroller's office. Plaintiffs have sought outside counsel and contacted the Department of Labor, all to no avail. Plaintiffs were either ignored or brushed off.

Plaintiffs were unable to exhaust all administrative remedies because they were not taken seriously. Plaintiffs assert that the Defendants' actions are willful, continuous and deliberate.

Plaintiffs assert that there are three Memorandums of Understanding (MOUs) that are central to plaintiffs and other similarly situated employees claims and who are covered under the agreement between the City Union of Baltimore and the Defendants. These MOUs, attached hereto as Exhibits A, B, and C, apply to Unit 1 non-supervisory employees and cover the following Baltimore City Police Department Lab Division, Crime Lab Tech I and II, Crime Lab Photographer, and Forensic Scientist I, Department of Public Works, Operations Tech Supervisor I (water treatment) Maintenance Tech Supervisor I, Painter Supervisor and Instrumentation Tec II. Baltimore City Health Department Animal Enforcement Officer, Medical lab Tech and Dental Assistant. Department of Transportation, Transportation Enforcement Officer, Parking Control Agent and a few others.

Plaintiffs believe all MOUs are in full force and effect with slight changes to past and current contract. All MOUs include the same shift descriptions, rates of pay, wage increases and encompasses other provisions that distinguishing between other employees who may work in the same or different agencies. Despite plaintiffs being divided by title and agency, Defendants' FLSA violations impact all employees in the same manner.

Factual Allegations Common to All Counts

Plaintiffs use Emergency Dispatcher Fenner earnings statement to illustrate the allegations raised against defendants for all plaintiffs who receive and continue to receive overtime pay in accordance with the MOUs (Exhibits A, B, and C). See time clock statement and earning statement (exhibits D and E). Plaintiffs allege that the same calculations apply to all other plaintiffs who have worked and continue to work overtime.

The following language included in the MOUs defines the rate of pay, hours worked, overtime and other job benefits that employees are entitled to:

1. Overtime Compensation

- All hours worked in excess of forty (40) hours scheduled with a work week shall be considered overtime. Non-exempt employees shall be compensated at the rate of one and one-half times their normal straight time rate of pay. All paid leave shall be counted as hours worked in the computation of overtime. The straight time rate shall be based upon the employee's annual salary divided by 1906.
- Employees in the Police Department, except for those assigned to the Communications Section, shall receive cash payment or compensatory time for overtimed worked.
- The overtime rate of pay for all hours worked on the seventh consecutive day worked in a regular work week shall be at the rate of two (2) times the normal straight time rate of pay.
- All regular classified employees as well as all shift employees, shall work a regular workday of eight (8) consecutive hours including a 40- minute duty-free unpaid lunch within each 24-hour

period, totaling 40 hours per week. A work shift shall consist of 8 consecutive hours, including a 40- minute minimum duty-free unpaid lunch period. In the case of Police Department employees may be required to work more than one shift in a twenty-four-hour period to accommodate routine shift rotations.

- A 3% across-the-board wage increase effective July 1, 2019, and a 2% across-the-board wage increase effective July1, 2020.
- Employees regularly assigned to night shift work shall be paid \$0.30 per hour above their established pay rate for each hour worked on a shift which commences between 2 PM and 5AM. This provision shall not apply to employees whose emergency assignments start or carry into the above-named periods. When applicable, the night differential shall be paid at the appropriate overtime rate.
- An employee not regularly assigned to the night shift but who works overtime into the night shift shall receive the night differential for all overtime hours worked into the night shift in excess of ten hours in a given bi-weekly payroll period. This differential shall be paid at the rate of \$0.30 per hour at time and one-half.
- An employee who works overtime extending into the night shift shall be paid the night differential of \$ 0.30 at time and one-half that rate if they work the entire night shift, regardless of the total number of hours worked within the given payroll period.

Differences in MOUs (Exhibits B and C):

- Exhibit B- Article 11 includes a 3.5% across-the-board wage increase followed by a 1% increase retroactive to July 2021.
- Section D- Shift differential changed to \$ 0.50 per hour in addition to \$ 0.30 at time and one half for overtime once requirements are met.
- Exhibit C- A 4% across-the-board wage increase retroactive to July 2023, and another 4% increase effective July 2024. Shift differential of \$ 0.50 per hour in addition to \$ 0.30 at time and one-half for overtime once requirements are met.

Plaintiffs specifically Emergency Dispatchers work three shifts: 2 PM to 10 PM, 10 PM to 6 AM, and 6 AM to 2 PM. Using Emergency Dispatcher Fenner who is assigned to the 10 PM to 6 AM shift but also works overtime on the 2 PM to 10 PM shift. (Exhibits D and E yearly samples). As shown in Exhibits D and E there are clear discrepancies with respect to the hours worked vs hours paid and at what rate vs what the MOUs state.

Plaintiffs' illustrations are common of similarly situated employees who voluntarily work those shifts/hours and that the correct shift differential or compensation was not applied at the correct rate. Plaintiffs believe that due to these errors, and miscalculations it affected their salary in whole or part and other benefits it encompasses.

Plaintiffs claim Defendants do/did have available remedies and solutions concerning payroll however plaintiffs contend that it was often not worth the hassle and difficult to navigate because it seemed to always be someone's else's job or department contact someone about payroll issues. These include long delays for compensation, incorrect compensation, or no compensation in some cases leading

to extreme frustration. In some cases, Plaintiffs received quick, too late to no resolution. (Exhibit F correspondence).

- According to “Workday” (Exhibit D time clock statement) Emergency Dispatcher Fenner (Exhibit E) earning statements.

Plaintiffs using Emergency Dispatcher Fenner correspondence (Exhibit F) started to utilize systems in place from defendants’ procedures “Workday” Pay adjustment forms and other contact information with reference to payroll discrepancies around January 21, 2021, and continued thru December 2022.

Plaintiffs attempted to formally and informally receive compensation for all employees similarly situated to no avail. As such plaintiff assert that defendants are in violation of the FLSA 29 U.S.C § 201 et seq, because defendants have failed to compensate Plaintiffs at an overtime rate of no less than one and one-half times plaintiffs’ regular rate of pay. 29 U.S.C § 207 (a) (1): (a) (2) C. Defendants and Union were made aware of violations and continue to willfully refuse to comply with the FLSA.

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? *(check all that apply)*

☒ Federal question

☐ Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

A. If the Basis for Jurisdiction Is a Federal Question

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

Respectfully, see attached

B. If the Basis for Jurisdiction Is Diversity of Citizenship**1. The Plaintiff(s)****a. If the plaintiff is an individual**

The plaintiff, *(name)* _____, is a citizen of the State of *(name)* _____.

b. If the plaintiff is a corporation

The plaintiff, *(name)* _____, is incorporated under the laws of the State of *(name)* _____, and has its principal place of business in the State of *(name)* _____.

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MARYLAND**

II. Basis for Jurisdiction.

Plaintiffs believe that this honorable court has jurisdiction over plaintiffs claim pursuant to 28 U.S.C § 1331, as the claims arise under the Fair Labor Standard Act (FLSA), codified at 29 U.S.C § 201 et seq, and Code of Federal Regulations, specifically 29 C.F.R 778.415.

Plaintiffs also assert that pursuant to 28 U.S.C § 1391, this is the proper venue because all defendants are residents of the State of Maryland and the acts and omissions giving rise to plaintiffs' claims occurred and continues to occur in the State of Maryland, specifically Baltimore City.

Plaintiffs' claims along with those of similarly situated individuals, constitute a well-defined community of interest in their respective questions of law and fact. These questions include whether defendants failed to fully compensate plaintiffs for all overtime hours worked at the correct rate of time and one- half, which encompasses compensatory time, double-time, shift differential, overtime and other employee benefits.

2. The Defendant(s)

a. If the defendant is an individual

The defendant, (name) _____, is a citizen of the State of (name) _____. Or is a citizen of (foreign nation) _____.

b. If the defendant is a corporation

The defendant, (name) _____, is incorporated under the laws of the State of (name) _____, and has its principal place of business in the State of (name) _____. Or is incorporated under the laws of (foreign nation) _____, and has its principal place of business in (name) _____.

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because *(explain)*:

Respectfully see attached

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MARYLAND**

The Amount in Controversy

The amount the plaintiffs claim the defendants owe, or the amount at stake, exceeds \$75,000, exclusive of interest and court cost. This substantial amount is due to the necessity of conducting an independent audit of all affected employees. The audit must account for the extended duration of the violations and the complexity arising from various pay rates. These include wage increases, seniority, double-time, shift differential, overtime, compensatory time, retroactive pay, and other related factors.

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

Respectfully, see attached.

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MARYLAND**

III. STATEMENT of CLAIM

Plaintiffs allege violations of the Fair Labor Standards Act (FLSA), 29 U.S.C. § 201, et seq and Code of Federal Regulations 29 C.F.R, 778.415. Plaintiffs contend that the defendants did not fully compensate plaintiffs for all overtime hours worked.

Plaintiffs' claims and those similarly situated, depend on a demonstrating defendants' acts and omissions did give rise to plaintiffs' right to the relief looked for. Plaintiffs' claims against defendants are brought as a collective action, on their own behalf and on behalf of all others similarly situated, under provisions 29 U.S.C. § 216 for damages, a three --year statute of limitations, and relief incident and subordinate, including cost and attorney fees.

Plaintiffs allege that defendants have incorrectly calculated their overtime wages by using the wrong hours worked figure as the denominator in computing the regular rate of pay.

Plaintiffs also claim that that defendant did not include shift differential compensation, double-time, holiday pay, and other benefits in the calculation of overtime compensation at time and one- half. This includes, but is not limited to,

being engaged to wait while receiving assignments/direction from supervisors, which is also compensable time under FLSA.

Plaintiffs further allege that defendants did not include benefit payments in computing plaintiffs' regular rate of pay. Plaintiffs further allege that defendants retaliated against plaintiffs for pursuing their unpaid overtime wages.

Central to plaintiff's' claims are three Memoranda of Understanding (MOUs) that cover the years 2020/21, 2022/23, and 2024/25, as they pertain to wages and schedules of covered employees.

Central to plaintiffs' claims are three memoranda of understanding that cover the years of 20/21, 22/23, and 24/25 because they pertain to wages and schedules of covered employees such as Baltimore Police Emergency Dispatchers and other that are covered, including the Bureau of Recreation, Department of Public Works, Crime Lab, and other similar situated employees.

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages. For any request for injunctive relief, explain why monetary damages at a later time would not adequately compensate you for the injuries you sustained, are sustaining, or will sustain as a result of the events described above, or why such compensation could not be measured.

Respectfully, see attached

**IN THE UNITED STATES DISTRICT COURT Rule 23
FOR THE DISTRICT OF MARYLAND**

IV. RELIEF

Plaintiffs request that this honorable court certify them as a collective class pursuant to 29 U.S.C § 216 (b) and federal Rules of Civil Procedure Rule 23. This certification is sought to include all similarly situated employees who have been affected by the defendants; alleged violations of the Fair Labor Standards Act (FLSA). To support this request, plaintiffs assert the following:

Plaintiffs included a Motion for Conditional Class Certification FLSA Collective Action.

- Commonality: there are questions of law and fact common to the class, including whether the defendants failed to pay overtime wages and maintain accurate records as required by the FLSA.
- Numerosity: The class is so numerous that joinder of all members is impracticable. The exact number of class members will be determined through discovery, but it is believed to be substantial (*see attached parties to compliant*).

- **Typicality:** The claims of the named plaintiffs are typical of the claims of the class, as all members have been subjected to the same unlawful practices by the defendants.
- **Adequacy:** the named plaintiffs will fairly and adequately protect the interest of the class. They have no conflicts of interest with other class members and are represented by the lead plaintiff on behalf of all similarly situated employees.

Plaintiffs request that this honorable court declare that the defendants' actions are in violation of the Fair Labor Standard Act (FLSA), 29 U.S.C § 201 et seq.

Specifically, the plaintiffs assert that the defendants have deprived them and all future pot-in plaintiffs of their rights, protections, and entitlements under FLSA by:

- **Failing to pay Overtime Wages:** Defendants have not compensated employees for all overtime work at the rate of one and one-half times their regular rate of pay as required by 29 U.S.C § 207.
- **Inadequate Record Keeping:** Defendants have failed to maintain accurate records of hours worked by employees, in violation of 29 U.S.C § 211 c.
- **Retaliatory Actions:** Defendants have engaged in retaliatory actions against employees who have asserted their rights under the FLSA, contrary to 29 U.S.C § 215 (a) (3).

Plaintiffs request that this court recognize these violations and provide appropriate relief to ensure that all affected employees receive the protections and entitlements guaranteed by the FLSA, award them and all future opt-in plaintiffs' damages pursuant to 29 U.S.C § 216, including but not limited to:

- **Unpaid Overtime/ Interest:** Compensation for all unpaid overtime wages owed to the plaintiffs, calculated at one and one-half times their regular rate of pay. Interest on the unpaid overtime wages, calculated from date wages were due until the date of payment.
- **Liquidated Damages/Equitable Relief:** An amount equal to the unpaid overtime wages as liquidated damages, as provided under 29 U.S.C § 216 (b), and any other equitable relief the court deems just and proper, such as requiring the defendants to implement policies and practices to ensure future compliance with the FLSA.
- **Attorneys' Fees and Cost:** Reasonable attorneys' fees and cost of the action, as provided under 29 U.S.C § 216 (b).
- **Joint and Several Liability:** A judgement against the defendants jointly and severally, holding each defendant responsible for the full amount of damages awarded.

Plaintiffs request that this honorable court appoint an independent forensic accountant to calculate the total amount of money, compensable time and other

benefits owed to the plaintiffs. This appointment is necessary to ensure an accurate and impartial assessment of the damages due to the plaintiffs. Additionally, plaintiffs request that the court consider appointing an employment lawyer to assist in this process. The employment lawyer would provide expertise in interpreting employment laws and regulations, ensuring that all calculations and assessment are conducted in accordance with the Fair Labor Standards Act and other relevant laws and regulations. These appointments will help ensure that all affected employees receive the full compensation and protections to which they are entitled.

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

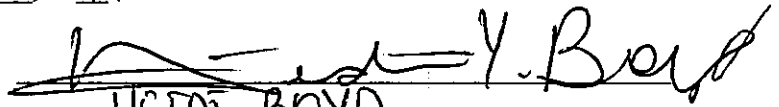
A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff


HEIDI BOYD

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney _____

Printed Name of Attorney _____

Bar Number _____

Name of Law Firm _____

Address _____

Telephone Number _____

Email Address _____

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

M. Bradley
Minyet Bradley

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Janice Brown
JANICE BROWN

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Jamaine Burrell
Jamaine Burrell

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Teresa Davis 7944
Teresa Davis

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Daryl Dinkins
Daryl Dinkins

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

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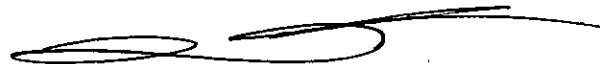
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Date of signing: 9 20, 2024

Signature of Plaintiff

Printed Name of Plaintiff


Dominick Dix

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

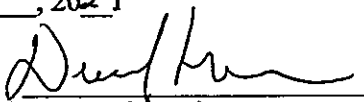
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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff


Derrick K Evans

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

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A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 9-20, 2024

Signature of Plaintiff

Charles Fenner

Printed Name of Plaintiff

Charles Fenner

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

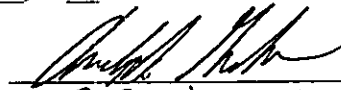
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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff


CHRISTOPHER GRAY

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Keyana Griffin

KEYANA GRIFFIN

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Tracy Hall
Tracy Hall

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

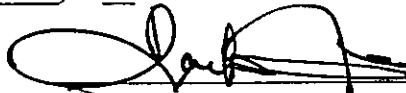
A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff



Quantine Jones

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

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Date of signing: 9-20, 2024

Signature of Plaintiff

[Signature]

Printed Name of Plaintiff

Robert Lewis

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Mobutu Longshore
Mobutu Longshore

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Tijana McCoy

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Tyrese Moore
Tyrese Moore

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff



(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

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Date of signing: 9 - 20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Kellye Rawlings
KELLYE RAWLINGS

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Robin Reed
Robin Reed

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

Chancee Lodge

Chancee Rodgers

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.


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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff


Sheena Scott

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

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Date of signing: 9-20, 2024:

Signature of Plaintiff

Printed Name of Plaintiff


Markita Smith

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

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Date of signing: 9-20, 2024

Signature of Plaintiff

Printed Name of Plaintiff

DIKESHA WOMACK
Dikisha Womack

(If more than one plaintiff is named in the complaint, attach an additional certification and signature page for each additional plaintiff.)

B. For Attorneys

Date of signing: _____, 20__.

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

Email Address

